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### UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

#### CHAPTER 13 PLAN AND RELATED MOTIONS

Name of Debto	Wes Wal Letitia Jo	lace bhnson Wallace	C	ase No: <b>20-50058-</b>	scs
This plan, dated	January 15, 2020	, is:			
	a modified F	pter 13 plan filed in this case. Plan, which replaces the I or _ unconfirmed Plan dated _			
	Date and Tir	me of Modified Plan Confirmation	on Hearing:		
	Place of Mo	dified Plan Confirmation Hearing	g:		
	The Plan provision	s modified by this filing are:			
	Creditors affected l	by this modification are:			
1. Notices					
To Creditors:					
	iscuss it with your a	s plan. Your claim may be redu attorney if you have one in this			
		of your claim or any provision the date set for the hearing on			
The Bankrupt (2) Norfolk and (a) A sched (1) an (2) a c	Newport News Div led confirmation ho mended plan is file onsent resolution to emoves the schedul	sions: m this plan without further not isions: a confirmation hearing earing will not be convened who d prior to the scheduled confir an objection to confirmation a ed confirmation hearing prior	will be held even if en: mation hearing; on nticipates the filing	f no objections have g of an amended pla	e been filed. an and the objecting
In addition, yo	may need to file a	timely proof of claim in order t	to be paid under a	ny plan.	
The following	natters may be of pa	articular importance.			
		ch line to state whether or not the boxes are checked, the provi			
		secured claim, set out in Section or no payment at all to the sec		<b>✓</b> Included	☐ Not included
B. Avoida	<u> </u>	or nonpossessory, nonpurcha		Included	<b>✓</b> Not included
	ndard provisions, se			<b>✓</b> Included	☐ Not included

**Funding of Plan.** The debtor(s) propose to pay the Trustee the sum of \$1,000.00 per month for 4 months, then \$1,410.00 per month for 8 months, then \$1,520.00 per month for 48 months.

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Other payments to the Trustee are as follows:

The total amount to be paid into the Plan is \$ 88,240.00

- **3. Priority Creditors.** The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
  - A. Administrative Claims under 11 U.S.C. § 1326.
    - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10% of all sums received under the plan.
    - 2. Check one box:
  - Debtor(s)' attorney has chosen to be compensated pursuant to the "no-look" fee under Local Bankruptcy Rule 2016-1(C)(1)(a) and (C)(3)(a) and will be paid \$ 4,934.00 , balance due of the total fee of \$ 5,434.00 concurrently with or prior to the payments to remaining creditors.
  - Debtor(s)' attorney has chosen to be compensated pursuant to Local Bankruptcy Rule 2016-1(C)(1)(c)(ii) and must submit applications for compensation as set forth in the Local Rules.
    - B. Claims under 11 U.S.C. § 507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid pursuant to 3.C below:

 Creditor
 Type of Priority
 Estimated Claim
 Payment and Term

 IRS Centralized Insolvency \*
 Taxes and certain other debts
 2,075.00
 Prorata

 Treasurer of York County
 Taxes and certain other debts
 665.00
 Prorata

 12 months

 12 months

C. Claims under 11 U.S.C. § 507(a)(1).

The following priority creditors will be paid prior to other priority creditors but concurrently with administrative claims above.

<u>Creditor</u> <u>Type of Priority</u> <u>Estimated Claim</u> <u>Payment and Term</u>

- 4. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
  - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 4(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 5 of the Plan. The following secured claims are to be "crammed down" to the following values:

 Creditor
 Collateral
 Purchase Date
 Est. Debt Bal.
 Replacement Value

 Bayport Credit Union\*
 2009 Dodge Charger
 09/2014
 6,557.00
 6,575.00

 Unknown miles
 Value based on NADA clean retail less \$1000 for

normal wear and tear

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<u>Creditor</u> <u>Collateral</u> <u>Purchase Date</u> <u>Est. Debt Bal.</u> <u>Replacement Value</u>

Bayport Credit Union\* 2015 Dodge Challenger 12/2015 14,716.00 13,525.00

Unknown miles Value based on NADA clean retail less \$1000 for normal wear and tear

#### B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay under §§ 362(a) and 1301(a) as to the interest of the debtor(s), any co-debtor(s) and the estate in the collateral.

Creditor Collateral Description Estimated Value Estimated Total Claim

Equiant Financial Services Kings Creek Plantation 105B 6,083.00 7,761.00

Dakota Drive Williamsburg, VA 23185 York County

Value based on average sale price listed on Sell My

Timeshare Now

#### C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 4(D) and/or 7(B) of the Plan, as follows:

CreditorCollateralAdeq. Protection Monthly PaymentTo Be Paid ByOnemain2002 Ford Mustang Unknown100.00Trustee

miles

Value based on NADA clean retail less \$1000 for normal

wear and tear

Progressive Leasing Tires 38.00 Trustee

Bayport Credit Union\* 2009 Dodge Charger 66.00 Trustee

Unknown miles

Value based on NADA clean retail less \$1000 for normal

wear and tear

Bayport Credit Union\* 2015 Dodge Challenger 135.00 Trustee

Unknown miles

Value based on NADA clean retail less \$1000 for normal

wear and tear

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 7(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

## D. Payment of Secured Claims on Property Being Retained (except those loans provided for in section 6 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation specified in sub-section A and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

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Creditor	Collateral	Approx. Bal. of Debt or "Crammed Down" Value	Interest Rate	Monthly Payment & Est. Term
Onemain	2002 Ford Mustang Unknown miles Value based on NADA clean retail less \$1000 for normal wear and tear	10,331.00	6.75%	246.19 48 months
Progressive Leasing	Tires	2,479.00	6.75%	59.08 48 months
Bayport Credit Union*	2009 Dodge Charger Unknown miles Value based on NADA clean retail less \$1000 for normal wear and tear	6,557.00	6.75%	156.26 48 months
Bayport Credit Union*	2015 Dodge Challenger Unknown miles Value based on NADA clean retail less \$1000 for normal wear and tear	13,525.00	6.75%	322.31 48 months

#### E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' principal residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 6 of the Plan.

#### 5. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately 37 %. The dividend percentage may vary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately 0 %.
- B. Separately classified unsecured claims.

Creditor	Basis for Classification	Treatment
Equiant Financial Services	Kings Creek Plantation 105B Dakota Drive Williamsburg, VA 23185 York County Value based on average sale price listed	Paid100%
	on Sell My Timeshare Now	
Bayport Credit Union	Consumer Debt	Paid100%
Kings Creek Plantation	Consumer Debt	Paid100%

- 6. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Principal Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5).
  - A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement. A default on the regular contract payments on the debtor(s) principal residence is a default under the terms of the plan.

<u>Creditor</u>	<u>Collateral</u>	Regular	Estimated_	Arrearage	Estimated Cure	Monthly
		Contract	Arrearage	Interest Rate	Period	Arrearage
		Payment				Payment
-NONE-						

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**B.** Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

<u>Creditor</u> <u>Collateral</u> Regular Contract Estimated Interest Rate Monthly Payment on Payment Arrearage on Arrearage & Est. Term

-NONE-

C. Restructured Mortgage Loans to be paid fully during term of Plan. Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § 1322(c)(2) with interest at the rate specified below as follows:

<u>Creditor</u> <u>Collateral</u> <u>Interest Rate</u> <u>Estimated Claim</u> <u>Monthly Payment & Term</u>

7. Unexpired Leases and Executory Contracts. The debtor(s) move for assumption or rejection of the executory contracts, leases and/or timeshare agreements listed below.

**A. Executory contracts and unexpired leases to be rejected.** The debtor(s) reject the following executory contracts:

<u>Creditor</u> <u>Type of Contract</u>

**B.** Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor(s) agree to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

Creditor Type of Contract Arrearage Monthly Payment for Estimated Cure Period

Arrears

AT&T Mobility 2 Year Cell Phone

Contract

- 8. Liens Which Debtor(s) Seek to Avoid.
  - A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

<u>Creditor</u> <u>Collateral</u> <u>Exemption Basis</u> <u>Exemption Amount</u> <u>Value of Collateral</u>

**B.** Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate adversary proceedings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

<u>Creditor</u> <u>Type of Lien</u> <u>Description of Collateral</u> <u>Basis for Avoidance</u>

#### 9. Treatment and Payment of Claims.

- All creditors must timely file a proof of claim to receive any payment from the Trustee.
- If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph

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does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.

- If a claim is listed in the Plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
- The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- If relief from the automatic stay is ordered as to any item of collateral listed in the plan, then, unless otherwise ordered by the court, all payments as to that collateral will cease, and all secured claims based on that collateral will no longer be treated by the plan.
- Unless otherwise ordered by the Court, the amount of the creditor's total claim listed on the proof of claim controls over any contrary amounts listed in the plan.
- 10. Vesting of Property of the Estate. Property of the estate shall revest in the debtor(s) upon confirmation of the Plan.

  Notwithstanding such vesting, the debtor(s) may not transfer, sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- 11. Incurrence of indebtedness. The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, whether unsecured or secured, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.

12	NT 4	1I DI	D
12.	NOUSIAMO	iara Pian	<b>Provisions</b>

None. If "None" is checked, the rest of Part 12 need not be completed or reproduced.

Under Bankruptcy Rule 3015(c), nonstandard provisions must be set forth below. A nonstandard provision is a provision not otherwise included in the Official Form or deviating from it. Nonstandard provisions set out elsewhere in this plan are ineffective.

The following plan provisions will be effective only if there is a check in the box "Included" in § 1.C.

Lower payment in the first 4 months is due to Debtor wife having to have surgery in February in Florida and Debtor husband will not be working during that time and they will have roughly \$3000 in expenses.

Debtor wife is paying her Student loans outside of the bankruptcy. She is on the income driven based plan that is currently \$500 but can go up to no more than \$1750 a month. We will amend the budget anytime that the payment changes.

Dated: <b>January 15, 2020</b>	
/s/ Wes Wallace	/s/ Sebastiana R. Bradstreet
Wes Wallace	Sebastiana R. Bradstreet
Debtor 1	Debtors' Attorney
/s/ Letitia Johnson Wallace	
Letitia Johnson Wallace	
Debtor 2	

By filing this document, the Attorney for Debtor(s) or Debtor(s) themselves, if not represented by an attorney, also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in the Local Form Plan, other than any nonstandard provisions included in Part 12.

Exhibits: Copy of Debtor(s)' Budget (Schedules I and J); Matrix of Parties Served with Plan

Certificate of Service

I certify that on \_\_\_\_\_\_\_\_\_, I mailed a copy of the foregoing to the creditors and parties in interest on the attached Service List.

/s/ Sebastiana R. Bradstreet
Sebastiana R. Bradstreet
Signature

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	621 N. Lynnhaven Road
	Virginia Beach, VA 23452
	Address
	757-340-4895
	Telephone No.
CERTIFICATE OF SERVI	ICE PURSUANT TO RULE 7004
I hereby certify that on	e forgoing Chapter 13 Plan and Related Motions were served upon the
Bayport Credit Union* c/o George Dudley Jr 3711 Huntington Ave Newport News, VA 23607	
by first class mail in conformity with the requirements of Rul	le 7004(b), Fed.R.Bankr.P.; or
$\checkmark$ by certified mail in conformity with the requirements of Rule	e 7004(h), Fed.R.Bankr.P
	/s/ Sebastiana R. Bradstreet
	Sebastiana R. Bradstreet

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### United States Bankruptcy Court Eastern District of Virginia

In ro		Wallace		Case No.	20-50058-SCS
In re	Letiti	a Johnson Wallace	Debtor(s)	Chapter	13
		SPECIAL NOTICE TO	) SECURED (	CREDITOR	
То:	c/o G 3711	ort Credit Union* eorge Dudley Jr Huntington Ave oort News, VA 23607			
		of creditor			
		Dodge Charger Unknown miles based on NADA clean retail less \$1000 for norr	nal wear and tear		
	Descr	iption of collateral			
1.	The a	attached chapter 13 plan filed by the debtor(s) proportion	oses (check one):		
	<b>✓</b>	To value your collateral. <i>See Section 4 of the paramount you are owed above the value of the collaboration and the collaboration an</i>			•
		To cancel or reduce a judgment lien or a non-posection 8 of the plan. All or a portion of the an	•		•

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Γ	Date objection due:			7 days prior to confirmation hearing
Γ	Date and time of confirmation hearing:			Friday, April 3, 2020 at 10:00 a.m.
P	Place of confirmation hearing:	Newport	News Co	ourtroom, U.S. Courthouse, 2400 West Avenue, Newport News, VA
			Wes W Letitia	allace Johnson Wallace
			Name(s	s) of debtor(s)
		By:		astiana R. Bradstreet
		-		iana R. Bradstreet
			Signatu	ıre
			<b>✓</b> Debt	or(s)' Attorney
				se debtor
			Sebast	iana R. Bradstreet
				of attorney for debtor(s)
				Lynnhaven Road a Beach, VA 23452
				s of attorney [or pro se debtor]
			Tel. #	757-340-4895
			Fax #	757-340-4894
	CERT	TIFICATE O	F SERV	ICE
	ertify that true copies of the foregoing Notice a sted above by	and attached C	hapter 13	3 Plan and Related Motions were served upon the
	first class mail in conformity with the require	ements of Rul	e 7004(b	), Fed.R.Bankr.P; or
<b>√</b>	certified mail in conformity with the require	ments of Rule	7004(h),	, Fed.R.Bankr.P
this <b>Jan</b>	nuary 17, 2020.			
			/s/ Seb	astiana R. Bradstreet
				tiana R. Bradstreet ure of attorney for debtor(s)

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### United States Bankruptcy Court Eastern District of Virginia

In re		Wallace ia Johnson Wallace	Case No.	20-50058-SCS
	Louis	Debtor(s)	Chapter	13
		SPECIAL NOTICE TO SECURED	CREDITOR	
То:	c/o G 3711	ort Credit Union* eorge Dudley Jr Huntington Ave port News, VA 23607		
		e of creditor		
		Dodge Challenger Unknown miles based on NADA clean retail less \$1000 for normal wear and teal	r	
		ription of collateral		
1.	The a	attached chapter 13 plan filed by the debtor(s) proposes (check one):		
1.				
	<b>V</b>	To value your collateral. <i>See Section 4 of the plan.</i> Your lien wamount you are owed above the value of the collateral will be tre		
		To cancel or reduce a judgment lien or a non-purchase money, no <b>Section 8 of the plan.</b> All or a portion of the amount you are ow		

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	y for the details of how your claim is treated. The plan may be confirmed, a written objection by the date specified <u>and</u> appear at the confirmation hear (s), their attorney, and the chapter 13 trustee.
Date objection due:	7 days prior to confirmation hearing
Date and time of confirmation hearing:	Friday, April 3, 2020 at 10:00 a.m.
Place of confirmation hearing:	Newport News Courtroom, U.S. Courthouse, 2400 West Avenue, Newport News, VA
	Wes Wallace Letitia Johnson Wallace
	Name(s) of debtor(s)
	By: /s/ Sebastiana R. Bradstreet
	Sebastiana R. Bradstreet
	Signature
	<ul><li>✓ Debtor(s)' Attorney</li><li>☐ Pro se debtor</li></ul>
	Sebastiana R. Bradstreet
	Name of attorney for debtor(s) 621 N. Lynnhaven Road Virginia Beach, VA 23452
	Address of attorney [or pro se debtor]
	Tel. # <b>757-340-4895</b>
	Fax # <b>757-340-4894</b>
CE	ERTIFICATE OF SERVICE
by certify that true copies of the foregoing Notice or noted above by	ce and attached Chapter 13 Plan and Related Motions were served upon the
☐ first class mail in conformity with the req	quirements of Rule 7004(b), Fed.R.Bankr.P; or
certified mail in conformity with the requ	uirements of Rule 7004(h), Fed.R.Bankr.P
s <u>January 17, 2020</u> .	
	/s/ Sebastiana R. Bradstreet
	Sebastiana R. Bradstreet

Debt	or 1	Wes Wallac	^		
Debt	.01 1	wes wallac	e		
	or 2 se, if filing)	Letitia John	son Wallace		
Jnite	ed States Bankrupt	cy Court for the	e: EASTERN DISTRICT	OF VIRGINIA	
Case	e number 20-5	50058-SCS			Check if this is:
f kno	wn)			-	☐ An amended filing ☐ A supplement showing postpetition chapte 13 income as of the following date:
Of	ficial Form	106I			MM / DD/ YYYY
Sc	hedule I: \	our Inc	ome		12 NAME / 18 NAM
upp pou ttac	lying correct infor se. If you are sepa h a separate shee	mation. If you arated and you t to this form.	are married and not filli ur spouse is not filing wi On the top of any additi	ng jointly, and your spouse is livith you, do not include informati	and Debtor 2), both are equally responsible fo ring with you, include information about your on about your spouse. If more space is needed d case number (if known). Answer every quest
upp pou	lying correct infor se. If you are separate shee  1: Describe Fill in your emplo	mation. If you arated and you to this form.	are married and not filli ur spouse is not filing wi On the top of any additi	ng jointly, and your spouse is livith you, do not include informational pages, write your name an	ring with you, include information about your on about your spouse. If more space is needed d case number (if known). Answer every quest
upp oou tac Part	lying correct infor se. If you are separate shee  1: Describe  Fill in your emploinformation.	mation. If you arated and you to this form. Employment	are married and not filli ur spouse is not filing wi On the top of any additi	ng jointly, and your spouse is livith you, do not include informational pages, write your name and	ring with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every quest
upp pou ttac Part	lying correct infor se. If you are separate shee  1: Describe Fill in your emplo	mation. If you arated and you to this form. Employment  yment han one job, page with	are married and not filli ur spouse is not filing wi On the top of any additi	ng jointly, and your spouse is livith you, do not include informational pages, write your name an	ring with you, include information about your on about your spouse. If more space is needed d case number (if known). Answer every quest
upp oou tac Part	lying correct inforse. If you are separate shee  1: Describe  Fill in your emploinformation.  If you have more thattach a separate	mation. If you arated and you to this form. Employment  yment han one job, page with	are married and not filing wi ur spouse is not filing wi On the top of any additi	ng jointly, and your spouse is livith you, do not include informational pages, write your name and Debtor 1  Employed	ving with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every quest  Debtor 2 or non-filing spouse  Employed
upp pou ttac Part	lying correct inforse. If you are separate shee  1: Describe  Fill in your emploinformation.  If you have more thattach a separate information about a separate information	rmation. If you arated and you to this form. Employment owners with an one job, page with additional seasonal, or	are married and not filing wi on the top of any additi	ng jointly, and your spouse is livith you, do not include informational pages, write your name and  Debtor 1  Employed  Not employed	pring with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every quest  Debtor 2 or non-filing spouse  Employed  Not employed  Registered Nurse
upp pou ttac Part	lying correct inforse. If you are separate shee  1: Describe  Fill in your emploinformation.  If you have more thattach a separate prinformation about employers.  Include part-time, separate principal separate principal separate prinformation about semployers.	mation. If you arated and you to this form. Employment  han one job, page with additional seasonal, or k. aclude student	are married and not filing wi on the top of any additi Employment status	ng jointly, and your spouse is livith you, do not include informational pages, write your name and Debtor 1  Employed  Not employed  Truck Driver  The Other Moving Company	Debtor 2 or non-filing spouse  Employed  Not employed  Registered Nurse
upp pou ttac Part	lying correct inforse. If you are separate shee  1: Describe  Fill in your emploinformation.  If you have more thattach a separate information about employers.  Include part-time, self-employed wor Occupation may in	mation. If you arated and you to this form. Employment  han one job, page with additional seasonal, or k. aclude student	are married and not filing wi on the top of any additi Employment status  Occupation  Employer's name	Debtor 1  Employed  Truck Driver  The Other Moving Compailnc.  4375 George Washington Memorial Hwy Hayes, VA 23072	Debtor 2 or non-filing spouse  Employed  Not employed  Registered Nurse  District 19 Community SB  20 W. Bank Street Suite 2

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 7,006.00 3,783.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 3,783.00 7,006.00 \$

Official Form 106I Schedule I: Your Income page 1

Debt Debt		Wes Wallace Letitia Johnson Wallace			Case	number (if k	пои	n)	20-50	0058-S	cs	
	0	or Proc. Albany	4			Debtor 1					spouse	
	Cop	y line 4 here	4.		\$_	3,78	3.0	0	\$		,006.00	<u>)                                    </u>
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	а.	\$	882	2.0	0	\$	1	,281.00	)
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$		0.0	0	\$		280.00	)
	5c.	Voluntary contributions for retirement plans	50		\$		0.0		\$		105.00	
	5d.	Required repayments of retirement fund loans	50		\$_		0.0		\$		0.00	
	5e. 5f.	Insurance	5∈ 5f		\$ \$	342			\$_		278.00	_
	5ı. 5g.	Domestic support obligations Union dues	50 50		\$ _		0.0 0.0		\$_ \$		0.00	_
	5h.	Other deductions. Specify:	_	ษ. า.+	\$ -			0	· : —		0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_     6.		* \$	1,22			\$	1	,944.00	_
		. ,			· —				· <del>-</del>			
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,559	9.0	0	\$	5	,062.00	<u>)</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	88	а.	\$	(	0.0	0	\$		0.00	)
	8b.	Interest and dividends	8b	٥.	\$	(	0.0	0	\$		0.00	<u>)                                    </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	0.	_	æ				¢.		0.00	
	8d.	settlement, and property settlement.  Unemployment compensation	8c 8c		\$_ \$		0.0 0.0		\$ \$		0.00	_
	8e.	Social Security	86		\$ -		0.0		\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_		0.0	00	\$		0.00	_ <u>)</u>
	8g.	Pension or retirement income	8g	g.	\$		0.0		\$		0.00	)
	8h.	Other monthly income. Specify:	_ 8h	า.+	\$_	(	0.0	0	+ \$		0.00	<u>)                                    </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.0	0	\$		0.0	00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,559.00	+	\$_	5,0	62.00	= \$_	7,621.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe								e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies								12.	\$	7,621.00
											Comb	
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?								month	ly income
		Yes. Explain: Income from tax overpayment = ((last year's tax refund) - 1,000) / 12										

Debtor 1 Wes Wallace							•			
Detail 2 Lettia Johnson Wallace   An amended filing   An appliement showing postpetition chapter (Spouse, if filing)   An appliement showing postpetition chapter (Spouse, in filing)   An appliement showing postpetition chapter (Spouse, in filing)   An appliement showing postpetition chapter	FIII	in this informa	tion to identify yo	ur case:						
Debtor 2   Lettia Johnson Wallace   Separate Household   Separate Household of Debtor 2   Schedule J: Your Expenses as of the following date:	Debt	tor 1	Wes Wallace	,						
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA  MM / DD / YYYY    Ba sa complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information for supplying correct inf	Debt	tor 2	Latitia Johns	on Walls	200		_		_	wing postpetition chapter
Case number 20-50058-SCS  Official Form 106J  Schedule J: Your Expenses  12/1:  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question.  Batt 1: Describe Your Household  Is this a joint case?  No. Go to line 2.  Yes. Dobos Debtor 2 live in a separate household?  No. Do not list Debtor 1 and Pyes.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents anames.  Fill out this information for each dependent			Letitia Joiliis	on want	106		"			01 1
Official Form 106J Schedule J: Your Expenses  12/1:  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Describe Your Household  Is Is this a joint case?  No. Go to line 2.  Yes. Debor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do not list Debtor 1 and Debtor 2.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents and seed dependent	Unite	ed States Bankr	uptcy Court for the:	EASTE	RN DISTRICT OF VIRG	SINIA		M	M / DD / YYYY	
Official Form 106J Schedule J: Your Expenses  12/1:  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Describe Your Household  Is Is this a joint case?  No. Go to line 2.  Yes. Debor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do not list Debtor 1 and Debtor 2.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents and seed dependent	Case	e number 20	-50058-SCS							
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part     Describe Your Household     Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Yes   Des	(If kr									
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part     Describe Your Household     Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Your Household   Describe Yes   Des	Of	fficial Fo	rm 106J				-			
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Striat   Describe Your Household				Exner	1888					12/1
1. Is this a joint case?  No. Go to line 2.  No Specifical Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?  Do not list Debtor 1 and Debtor 2.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Fill out this information for Debtor 2 better 1 and Debtor 2.  Do not state the dependents names.  Fill out this information for Debtor 2 better 1 and Debtor 2.  Do not state the dependents names.  Fill out this information for Debtor 2 better 1 and Debtor 2.  Do not state the dependents names.  Fill out this information for Debtor 2 better 1 and Debtor 2 better 1 and Debtor 1 and Debtor 2 better 1 and Debtor 1 and Debtor 1 and Debtor 2 better 1 and Debtor 1 and Debtor 1 and Debtor 1 and Debtor 2 better 1 and Debtor 1	Be a info nun	as complete a ormation. If m nber (if know	and accurate as ore space is nee	possible. eded, atta	If two married people ch another sheet to th					or supplying correct
No. Go to line 2.				hold						
Yes. Does Debtor 2 live in a separate household?   No	١.	_								
No				n a senar	ate household?					
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?		_		ii a sepair	ate nousenoid:					
Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate Your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses a paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. \$  80.00  4c. \$  80.00  4c. \$  128.00  4c. \$  20.00			•	st file Offici	al Form 106J-2, Expens	ses for Separate House	ehold of D	ebtor	2.	
Debtor 2.  Debtor 1 or Debtor 2 age live with you?  Do not state the dependents names.  grandaughter 7   No   Yes   No   No   Yes   No   No   Yes   Yes   No   Yes   Yes   No   Yes	2.	Do you have	e dependents?	□ No						
dependents names.    grandaughter   7			ebtor 1 and	Yes.		•		_		
Daughter  Daught		Do not state	the							■ No
Daughter   29		dependents	names.			grandaughter			7	☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?    Setimate Your Ongoing Monthly Expenses						Davahtan			20	
3. Do your expenses include expenses of people other than yourself and your dependents?  Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 80.00 4b. Property, homeowner's, or renter's insurance  4b. \$ 126.00 4c. Home maintenance, repair, and upkeep expenses						Daugnter				
3. Do your expenses include expenses of people other than yourself and your dependents?    Part 2:										
3. Do your expenses include expenses of people other than yourself and your dependents?  ☐ Yes  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. Real estate taxes  4a. \$ 80.00										
expenses of people other than yourself and your dependents?    Part 2:										☐ Yes
Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 80.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses  4c. \$ 200.00	3.			han						
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 0.00  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses					Yes					
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 0.00  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses	Part	f 2: Estim	ate Your Ongoir	na Monthi	v Evnenses					
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 0.00  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses  4d. \$ 126.00  1200.00	Esti exp	imate your ex enses as of a	penses as of yo	our bankrı	uptcy filing date unles					
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses  4. \$  0.00  4. \$  80.00  4a. \$  126.00  4c. \$  200.00	the	value of such	n assistance and	າon-cash ເ d have inc	government assistand luded it on <i>Schedule</i>	e if you know I: Your Income			Your exp	enses
payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses  4d. \$  80.00  4b. \$  126.00  4c. \$  200.00	(Oii	iiciai Foiiii 10	01.)							
4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 80.00 126.00 200.00	4.				-	e. Include first mortgag	e 4.	\$		0.00
4b. Property, homeowner's, or renter's insurance 4b. \$ 126.00  4c. Home maintenance, repair, and upkeep expenses 4c. \$ 200.00		If not includ	ed in line 4:							
4c. Home maintenance, repair, and upkeep expenses 4c. \$ 200.00		4a. Real e	state taxes				4a.	\$		80.00
and the contraction of contracting the second secon								-		
5. Additional mortgage payments for your residence, such as home equity loans 5. \$ 0.00	5.					home equity loans		-		

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Debtor 1 Debtor 2		Wes Wallace Letitia Johnson Wallace	Case num	ber (if known)	20-50058-SCS
6.	Utiliti	es:			
0.	6a.	Electricity, heat, natural gas	6a.	\$	200.00
	6b.	Water, sewer, garbage collection	6b.	\$	175.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	615.00
	6d.	Other. Specify: Home warranty	6d.	\$	54.00
7.	Food	and housekeeping supplies		\$	900.00
8.	Child	care and children's education costs	8.	\$	0.00
9.	Cloth	ing, laundry, and dry cleaning	9.	\$	200.00
		onal care products and services	10.	\$	150.00
		cal and dental expenses	11.	\$	271.00
12.		sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	385.00
13		tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
		table contributions and religious donations	14.	*	42.00
	Insur	•		<u> </u>	42.00
		of include insurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insurance	15a.	\$	0.00
	15b.	Health insurance	15b.	\$	0.00
	15c.	Vehicle insurance	15c.	\$	220.00
		Other insurance. Specify: Malpractice Insurance	15d.	\$	9.00
16.		<ul><li>s. Do not include taxes deducted from your pay or included in lines 4 or 20.</li><li>fy: Personal property taxes, tags, etc.</li></ul>	16.	\$	80.00
17		Ilment or lease payments:		<u> </u>	00.00
		Car payments for Vehicle 1	17a.	\$	0.00
		Car payments for Vehicle 2	17b.	\$	0.00
	17c.	Other. Specify: Student Loans	17c.	\$	500.00
	17d.	Other. Specify:	17d.	\$	0.00
18.	Your	payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
10		cted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). r payments you make to support others who do not live with you.	10.	\$ ———	
19.		fy: Daughter and Grandaughter	19.	Ψ	1,200.00
20		r real property expenses not included in lines 4 or 5 of this form or on Scho		our Income	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.	·	0.00
	20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
		Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other	r: Specify: Contingencies	21.	+\$	381.00
	Mem	bership dues for Wifes Work		+\$	23.00
		age Unit		+\$	110.00
	Wife	s Annual mandatory Work conferences		+\$	90.00
22	Calcu	late your monthly expenses			
		Add lines 4 through 21.		\$	6,211.00
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
		Add line 22a and 22b. The result is your monthly expenses.		\$	6,211.00
-		, , ,			0,211.00
23.		ulate your monthly net income.	225	<b>c</b>	7 004 00
		Copy line 12 (your combined monthly income) from Schedule I.	23a.		7,621.00
	∠3D.	Copy your monthly expenses from line 22c above.	23b.		6,211.00
	23c.	Subtract your monthly expenses from your monthly income.	00.5	· ·	1,410.00
		The result is your monthly net income.	23c.	\$	1,410.00

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Debtor 1 Debtor 2		Wes Wallace Letitia Johnson Wallace	20-50058-SCS			
24.	For ex	you expect an increase or decrease in your expenses within the year example, do you expect to finish paying for your car loan within the year or do you e fication to the terms of your mortgage?		ase or decrease because of a		
			usband being a truck driver	and having to eat out a lot		
		Charitable contributions is based on the giving the and not to one single charity or church.	nat debtors give to random	charities throughout the year		
		Debtors are contributing money to their daughter cannot pay for her bills.	and grandaughter since da	aughter is out of work and		
		Debtors will be cleaning out their storage unit an	d will be aetting rid of it wit	hin 1 vr		

PO Box 509015 San Diego, CA 92150

Activate FGasea20L50058-SCS Doc 6BavFiled Offdit7/2000 Entered 01/17/20 09:55c32mm/PescoMain 3 Digcumention Ragge 17 of 19 PO BOX 9001087 Newport News, VA 23607 Louisville, KY 40290-1087

ADS/Comenity/Kay Jewelers P.O. Box 182789 Columbus, OH 43218

Bayport Credit Union\* c/o George Dudley Jr 3711 Huntington Ave Newport News, VA 23607 Credit Control Corp Po Box 120570 Newport News, VA 23612

AmeriMark Premier P.O. Box 2845 Monroe, WI 53566

Capital One P.O. Box 30285 Salt Lake City, UT 84130 Credit Control Corp P.O. Box 120568 Newport News, VA 23612

at & t Mobility PO Box 536216 Atlanta, GA 30353

Capital One Auto Finance P.O. Box 259407 Plano, TX 75026-1930

Credit One Bank P.O. Box 98872 Las Vegas, NV 89193

Attorney General Tax Division, USDOJ PO Box 227 Washington, DC 20044

Check City 2729 West Broad Street Richmond, VA 23220

Enhanced Recovery Company PO Box 57547 Jacksonville, FL 32241

Attorney General Office □ \* U.S. Department of Justice 950 Pennsylvania Ave. N.W Washington, DC 20503

Citi Financial Auto PO BOx 9575 Cade, LA 70519

Equiant Financial Services 4343 N. Scottsdale Road Scottsdale, AZ 85251

Auto-Owners Insurance P.O. Box 740312 Cincinnati, OH 45274

CMCS 10192 Grand River Road Suite 111 Brighton, MI 48116

Exeter Finance 1231 Greenway Drive Suite 450 Irving, TX 75038

AWL. Inc. 3910 W 6th Avenue Stillwater, OK 74074

Comcast P.O. Box 3006 Southeastern, PA 19398

FedLoan Servicing P.O. Box 60610 Harrisburg, PA 17106

Balance Credit 1389 Center Drive Suite 200 Park City, UT 84098 Continental Fin Co 4550 New Linden Hill Road Wilmington, DE 19808

Hampton Roads Finance Co. 441 Viking Drive Virginia Beach, VA 23452

Bayport Credit Union One Bayport Way Suite 350 Newport News, VA 23607

Convergent Outsourcing PO Box 9004 Renton, WA 98057

Hampton Roads Orthopaedics and 730 Thinble Shoals Blvd Suite 130 Newport News, VA 23606

Hollis Cobbases 20a 50058-SCS Doc 6 Martile de 191/17/20 Entered 01/17/20 09 55 32 Finders Main 6621 By Cir. Ste 180 Norcross, GA 30071

Page 18 of 19 PBOSMMents Monroe, WI 53566

CT CORPORATION SYSTEM 4701 COX RD STE 301 Glen Allen, VA 23060

Internal Revenue Service 400 North Eighth Street Box 76 M/S Room 898 Richmond, VA 23219

Masseys PO Box 2822 Monroe, WI 53566

Opportunity Financial 130 E Randolph Street Suite 1650 Chicago, IL 60601

IRS Centralized Insolvency \* PO Box 7346 Philadelphia, PA 19101

Meridian Financial Services P.O. Box 1410 Asheville, NC 28802

Peninsula Radiological Assoc P.O. Box 12087 Newport News, VA 23612

Jefferson Capital System 16 Mcleland Road Saint Cloud, MN 56303

Midland Credit Management 4310 East Broadway Phoenix, AZ 85040

Plain Green LLC 93 Mack Road Suite 600 Box Elder, MT 59521

K.Jordan PO Box 2809 Monroe, WI 53566

Midnight Velvet 1112 7th Avenue Monroe, WI 53566 Portfolio Recovery 120 Corporate Boulevard Suite 100 Norfolk, VA 23502

Kermit Richardson Unknown

Mobiloans P.O. Box 1409 Marksville, LA 71351 PREMIER BKCRD/FIRST PREMIER 601 S MINNESOTA AVE SIOUX Sioux Falls, SD 57104

Kings Creek Plantation 191 Cottage Cove Lane Williamsburg, VA 23185

Montgomery Ward 1112 7th Avenue Monroe, WI 53566

Professional recovery Consulta 2700 Meridian Parkway Suite 200 Durham, NC 27713

LabCorp P.O. Box 2240 Burlington, NC 27216 NCB Management Services 1 Allied Drive Feasterville Trevose, PA 19053

Progressive Leasing 256 West Data Drive Draper, UT 84020

M. Richard Epps 605 Lynnhaven Pkwy, Ste 200 Virginia Beach, VA 23452

Nelnet Loan Services Inc P.O. Box 82561 Lincoln, NE 68501

Richmond General District Ct. 400 North 9th Street, Rm. 203 Richmond, VA 23219-1546

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